

# MQAC CA MANAGEMENT TEAM ASSESSMENT

Wednesday CMT – Telephonic Assessment

Respondent: Said, Mohammad H.

Case Number: 2011-155813

Date: <u>4-27-11</u>	Staff Attorney: <u>Mager</u>	Clerk:
Panel Chair: <u>Gothold</u>	Cullen, Anderson, Brantner, Burger, Clower, Concannon, <u>Elders</u> , Green, Johnson, Pattison, <u>Tobin</u> Dore, <u>Gothold</u> , Harter, Harvey, Hensley, <u>Hopkins</u> , Page, Robins, Ruiz, Sen	
Staff Present: ED, ISU, PM, Staff Atty, Disc Mgr, Other	Jansen, <u>Dr. Hey</u> , <u>Smith</u> , Kitter, <u>Newman</u> , Kramer, Bucci Farrell, <u>Berg</u> , Caille, <u>McLaughlin</u> , <u>Landreau</u> , <u>Mager</u> , <u>Creighton</u>	

## A. FILE CLOSED PRIOR INVESTIGATION (BEFORE)

<input type="checkbox"/> BT1 - Advertising that is a technical violation	<input type="checkbox"/> BT7 - Insufficient information	<input type="checkbox"/> BT12 - Profession-Specific Threshold Explain: a) Violating confidentiality b) Inappropriate delegation to unlicensed person that does not involve invasive procedures or piercing of skin (e.g., RN instructs NA to apply skin cream) c) Failure to supervise resulting in no harm or minor harm to a patient d) Isolated incidents which suggest little or no patient harm, not likely to reoccur
<input type="checkbox"/> BT2 - Aged or outdated complaints	<input checked="" type="checkbox"/> BT8 - Issues which have been otherwise resolved. Explain resolution: (Detail corrective action: practitioner is already revoked; ongoing monitoring, etc.)	<input type="checkbox"/> BT13 - Referral to another program or agency
<input type="checkbox"/> BT3 - Billing and fee disputes except as designated by disciplining authority	<input type="checkbox"/> BT9 - Lack of complaint credibility	<input type="checkbox"/> BT14 - Risk minimal, not likely to reoccur
<input type="checkbox"/> BT4 - Communication and personality issues	<input type="checkbox"/> BT10 - No Jurisdiction	<input type="checkbox"/> BT15 - Time practice on an expired credential for a period of time accepted by the disciplining authority
<input type="checkbox"/> BT5 - Complainant withdrew	<input type="checkbox"/> BT11 - No violation at the time the event occurred	<input type="checkbox"/> BT16 - Unidentified complainant, client or patient name and no allegations of significant harm or potential harm
<input type="checkbox"/> BT6 - If allegations are true, no violation of law occurred	Further explanation (if any):	

**B. SCOPE OF INVESTIGATION AUTHORIZED:** ☐ Entire complaint ☐ Limit investigation ☐ Focus investigation

Notes:

**C. PRIORITY** ☐ A (risk of immediate danger) ☐ B (serious risk) ☐ C (moderate risk) ☐ D (minor risk) ☐ E (technical violations)

**D. SEXUAL MISCONDUCT CASES:** Refer complaints of sexual misconduct to the Secretary when the case does not involve clinical expertise or standard of care issues. (If the panel cannot tell if clinical issues exist, the panel may request the investigator contact the complainant or key witness)

☐ Panel finds there are clinical issues, do not refer ☐ No clinical issues, refer case to Secretary ☐ Contact complainant or witness for more info

## E. CLOSED AFTER INVESTIGATION

<input type="checkbox"/> Application investigation only - Panel decides to grant without conditions	
<input type="checkbox"/> A1-Care rendered was within standard of care	<input type="checkbox"/> A7-Mistaken identity
<input type="checkbox"/> A2-Complainant withdrew	<input type="checkbox"/> A8-No Jurisdiction
<input type="checkbox"/> A3- Unique closure (panel must explain)	<input type="checkbox"/> A11-No Whistleblower
<input type="checkbox"/> A5- Evidence does not support a violation	<input type="checkbox"/> A12-Risk minimal, not likely to reoccur
Further Explanation:	

# GUIDE FOR CLOSURE CODES

June 2010

Code	Closure	Description
	Application	Decision to grant an unrestricted license.
A-1	Care rendered was within standard of care	The evidence establishes that the respondent met or exceeded the standard of care.
A-2	Complainant withdrew complaint	The complainant withdrew the complaint, and the complainant's testimony is necessary to meet the burden of proof.
A-3	Unique closure (Panel must explain)	Any concerns regarding Respondent have been resolved through corrective action, license revocation, suspension, or other means. <ul style="list-style-type: none"> <li>• Respondent died.</li> <li>• Other circumstances (explain): _____</li> </ul>
A-5	Evidence does not support a violation	<ul style="list-style-type: none"> <li>• Cannot establish by clear, cogent, and convincing evidence that Respondent violated any UDA provision.</li> <li>• Includes situations where the investigator was unable to obtain all material evidence.</li> <li>• Despite the evidence, the alleged misconduct does not constitute a UDA violation.</li> </ul>
A-7	Mistaken Identity	Case opened under the wrong respondent's name.
A-8	No Jurisdiction	Respondent is not licensed in Washington, has never been licensed in Washington, and is not applying for a license in Washington.
A-11	No Whistleblower Release	Complainant would not sign a whistleblower release AND the complainant's identity is necessary to prove a UDA violation.
A-12	Risk Minimal- Not likely to Reoccur	There is sufficient evidence that Respondent violated the UDA, but the evidence indicates that (a) the violation is not likely to reoccur and (b) closure poses no more than a minimal risk to the public.

zdan guideclosecode revised pjh0521-2010

**MQAC REVIEW**  
**Case Number: 2011-155813**

Date: April 20, 2011  
Presented by: **George Heye, MD**

<b>Respondent:</b>	<b>SAID, MOHAMMAD HASSAN, MD</b>	<b>King County</b>
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<b>Complainant:</b>	<b>Montana Medical Board</b>
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<b>CASE SUMMARY</b>
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**The Respondent:**

Board Certified:	INTERNAL MEDICINE; and FAMILY MED/GERIATRIC MED
DOB:	10-22-1938
Licensed since:	05-22-1980
Expiration date:	10-22-2012
Medical School:	1967--U of Granada; Granada, Spain
Residency:	1972-1973--Ottawa Gen Hosp, Canada— FLEXIBLE OR TRANSITIONAL

**The Complainant:** Montana Medical Board

**Malpractice Settlement:** N/A.

**The Complaint:** On 3/31/2011 the Montana board issued conditions for the reinstatement of respondent's license upon reapplication. Action was based on MQAC action.

**RCM Review**

**Prior Cases:**

**86-02-0006MD** - Complaint about fees charges for a delivery when the respondent did not arrive until after the delivery.

***Closed NCFA.***

**86-02-0028MD** -

***Closed NCFA.***

**90-07-0018MD** - Respondent's office lost the patient's record.

***Closed NCFA.***

**90-09-0114MD** - Inappropriate prescribing and failure to monitor his PA.

***Closed w/Order.***

**91-08-0184MD** - Insurance company disputes appropriateness of diathermy treatments for MVA patients.

***Closed NCFA.***

**97-11-0017MD** - County Health district forwards a police report documenting unsanitary conditions in the respondent's office. On routine patrol, a door was noted to be open in the respondent's office. Upon investigation, the unsanitary conditions were noted. The county health district further advised of inaccurate immunization administration and recording which resulted in them removing the respondent from their program.

***Closed NCFA.***

**98-08-0046MD** - The Complainant expresses concern that the Respondent is prescribing large amounts of pain medications inappropriately for a family within his practice.

***Closed NCFA, SOC Withdrawn.***

**99-08-0063MD** - The Complainant asserts that the Respondent is prescribing scheduled drugs for a Patient in excessive quantities and continues to do so despite being informed that the Patient is filling scheduled meds from multiple practitioners and stole one of the Respondent's prescription pads.

***Closed NCFA.***

**06-02-0067MD** - A search warrant in support of a criminal investigation and signed by a Grant County Superior Court judge for Department records concerning the respondent was delivered to DOH on February 15, 2006. In support of the warrant is a Grant county Sheriff interview with a female patient who alleges that the respondent prescribed her excessive controlled drugs for shoulder pain even though she had been through rehab during the spring of 2005. The patient also alleges that the respondent expressed an interest in having sex with her and on one occasion reportedly grabbed her breasts when she tried to hug him. A letter from the respondent to the complainant supplied to the judge in support of the warrant was not included with the warrant.

***Closed with Agreed Order/on compliance.***

**06-08-0066MD** -- The respondent is allegedly prescribing excessive pain medications to a patient. The patient reportedly has had a number of MVA's due to medication side effects. The complainant feels that the patient has become addicted.

***Closed with Agreed Order/on compliance.***

**2009-132013** -- A prosecuting attorney indicates that the respondent may be in violation of an Agreed Order in that he reportedly wrote permission for medical marijuana for a patient in July of 2008. The patient is 18 and was arrested Nov. 6, 2008 for possession of drug paraphernalia, possession of marijuana, minor intoxicated in public, and obstructing law enforcement (combative and running from a police officer). The patient had a marijuana medical permission form apparently signed by the respondent on 8/17/08 and good for one year. Incidentally he was subsequently found to have another medical marijuana permission form on file with CBR Medical Inc., an apparent medical marijuana advocacy group. That form was signed by a different MD on 4/6/08 and was also good for one year. The police report makes no reference to a medical diagnosis that would justify the patient's use of marijuana.

The respondent's Agreed Order indicates in part that the respondent agrees to phase out his chronic pain practice and will conclude his management of chronic pain patients by December 31, 2008. The Order was effective July 10, 2008.

***Currently in Commission/Legal Review. RCM: Harvey; Staff Atty: McLaughlin..***

**2009-132391** -- The Director of a county medical society reports that in October of 2008 the respondent provided a medical marijuana authorization card to a person who was not his patient or under his care.

It is not known if this patient is the same as the one referred to below in case 2009-132013.

**Closed NCFA.**

**2009-132656** -- The respondent reportedly prescribed scheduled II medications in January 2009 for a patient AJ who is on long term opioids for chronic pain. The respondent is prohibited from taking care of chronic pain patients.

**Currently in Case Disposition.**

**2009-135076** -- The respondent has recently authorized marijuana for a patient with chronic back pain. The patient's probation officer wonders if this is in violation of respondent's Agreed Order that prohibits him from treating chronic pain with controlled substances.

**Currently in Commission/Legal Review. RCM: Harvey; Staff Atty: McLaughlin.**

**2009-139216** -- The Grant County Prosecuting Attorney reports that patient of the respondents may have overdosed on Methadone. The Prosecutor related that there had probably been 50+ deaths related to methadone in Grant County over the past two years. He referred MQAC to the police.

The Police Department provided a list of the medications that had been prescribed by two local health care providers, 139215PA & 139216MD

The police department also noted that 139215's name frequently came up during their investigations of known drug abusers and that 139216's name was on several of the prescriptions for controlled substances that they had found at the patient's residence.

The police department faxed a copy of the prescription labels they had found at the patient's residence. In addition to the patient's prescriptions, the police department included prescriptions for the patient's wife and son that were found.

Patient: Patient

HYDROC/APAP 7.5/325 #180. August 19, 2009, by 139215PA, PA-C

Methadone 10 mg #90, August 19, 2009, by 139215PA, PA-C

Diazepam 10 mg #30, August 13, 2009, by 139216MD.

HYDROCO/APAP 7.5/500 #10, August 3, 2009, by Dr. R H

HYDROC/APAP 10/650 #60. July 28, 2009, by 139215PA, PA-C

Methadone 10 mg #120, March 19, 2009, by 139215PA, PA-C

Patient's wife:

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OXYCOD/APAP 5/325 #60, July 27, 2009, by 139216MD.

Diazepam 10 mg #30, May 15, 2009, by 139216MD.

Oxycodone 5 mg #90, September 11, 2008, 139216MD

The patient's son:

HYDROCODONE/APAP 5/500 #96, March 21, 2009, by J W, MD

The police Department wanted to know if MQAC wanted to open a case on the MD & PA. They are ready to work with the Commission if additional information might be required.

**Currently in Case Disposition.**

**2009-142141** -- The respondent may be in violation of his Agreed Order by authorization of marijuana for a DM. DM's designated provider was arrested for possession of marijuana in April of 2008.

***Currently in Legal/RCM Review. Investigator Crowell; Staff Atty McLaughlin; RCM Harvey.***

**2009-144679** The complainant writes that the respondent is in violation of his agreed order to not take care of chronic pain patients after Dec 31, 2008. The basis for this allegation is the respondent's authorization for a patient to possess, grow (and presumably use) medical marijuana. The patient's DOB is 7/13/1993. (This may be the same patient as in case 2009-132013 although that patient is said to be 18.) ***Closed. Investigator Crowell; Staff Atty McLaughlin; RCM Harvey.***

**2010-147206** – A pharmacist received a prescription for 120 hydrocodone 10/500, 2-4 ts po qd. The prescription was written by the respondent. While the pharmacist was verifying the respondent's DEA and Commission Order the patient called and was told the prescription would be ready when all the information had been verified. A few minutes later the respondent called to ask why the pharmacist was refusing to fill the prescription. She again explained to the respondent about the checking process and how he was restricted from treating chronic non malignant pain for more than 90 days. He said he was treating an acute rotator cuff injury and that this was only his third hydrocodone prescription for her. He then told the pharmacist that he had already called the RX into another pharmacy, that the pt would pay cash for it there and that I didn't need to fill it. What concerned the pharmacist was when she told the respondent that the patient has state insurance and is restricted to our pharmacy he said that he is not her provider and that he has not seen her for two months and did not know this. ***Closed. Investigator: Crowell; Staff Atty: McLaughlin; RCM: Harvey.***

**2010-149889** – The complainant LPN writes that she was hired by a third party to review medical records, allegedly at the direction of the respondent, to determine if the patients qualified for medical marijuana. If the records supported the use of marijuana the LPN would sign her name to a medical marijuana permission card, in lieu of the respondent signing it. She never saw the respondent and eventually figured out that his name was being used to obtain records but that he was not involved in the process. The LPN became fearful of losing her license and resigned. She then reported the whole incident to the Nursing Commission consultant who referred the information to MQAC. ***Currently in Investigations.***

**2010-150655** A county prosecuting attorney sends in a copy of a medical marijuana authorization paper signed by the respondent on 12/13/09. He wonders if this violates the respondent's agreed order of July 10, 2008. ***Currently in Case Disposition.***

**2011-154050** – A county prosecutor feels that the respondent's 7/10/2010 writing for medical marijuana for a patient for a year violates his agreed Order which limits his treatment of chronic non-malignant pain using controlled substances to no more than 90 days. ***Currently in Case Disposition.***

**2011-154136** A CCO writes that in the past two years a number of his offenders have shown up with opioid prescriptions written by the respondent. Most recently an offender presented with a prescription for 60 Oxycodone and a medical marijuana authorization letter from the respondent. The offender reportedly told the respondent that he had a chronic back condition which he had never mentioned to the CCO or to the jail medical staff. ***Currently in Case Disposition.***

**2011-155470** – An assistant city attorney sends in copies of paperwork of a 3-8-2011 arrest of a driver with a suspended license. The driver had marijuana in the car as well as a medical authorization apparently signed by the respondent on 2-12-2011.

***Currently in Assessment.***

**Recommendation:**

# MEDICAL QUALITY ASSURANCE COMMISSION

## CMT

### Review of Cases

CMT DATE/  
Panel Members/  
Decision:

**MQAC CMT - APRIL 27, 2011**

William Gotthold, MD, Chair

Bruce Hopkins, MD

Terri Elders, Public Member

Judy Tobin, Public Member

**DECISION: CLOSED PRIOR TO INVESTIGATION**

Case No.: 2011-155813

The attached pages were reviewed:

123-128



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***Currently in Assessment.***

**Recommendation:**

## Washington Medical Quality Assurance Commission

## Board Action Disciplinary Alert Report

Report Date: 04/18/2011

Begin Date: 04/18/2011

End Date: 04/18/2011

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Name	DOB	Degree Code	School	Yr/Grad.
Said, Mohammad Hassan Mahmud	10/22/1938	MD	Universidad De Granada	1967

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License#: MD00018311

Reporting State Board:

MONTANA

Order Date: 03/31/2011

Action:

CONDITIONS FOR REINSTATEMENT/RESTORATION ESTABLISHED

Additional Details: Conditions established for reinstatement of license upon reapplication for licensure. Based on action taken by the Washington Medical Board.

Basis for Action(s): Due to Action Taken by Another Board/Agency

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**Case View Screen** [update]

Case Status	2011-155813 (PUBLIC) Intake	Date Created Date Received How Received Receiving Board Receiving Profession Receiving Department Received ByC Alleged Issues License Disciplinary Action Taken by a Federal, State, or Local Licensing Authority Case Nature Action in Another State/Jurisdiction	04/20/2011 04/18/2011 Email COMMISSION Physician And Surgeon License Case Intake ynthia R Hamilton  Action in Another State/Jurisdiction	Audit Entry Items Documents Notes Master Cases Participants Add Master Case Timeline History
Respondent ID Respondent Credential	360875 MOHAMMAD HASSAN SAID MD.MD.00018311			
Complainant ID Complainant	940837 Montana Medical Board			

**Comments:**  
**Action:** CONDITIONS FOR REINSTATEMENT/RESTORATION ESTABLISHED  
**Additional Details:** Conditions established for reinstatement of license upon reapplication for licensure. Based on action taken by the Washington Medical Board.  
**Order Date:** 03-31-2011

- Priority History
- Other Participants
- Resolution
- HIPDB Reports
- Action Items

**Priority History** [add]

Date	Priority	Priority Reason	Decision Maker	Decision Date	Comment	COR	User
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**Other Participants** [add]

No additional participants found

**Resolution** [update]

Department: Case Intake Worker: Cynthia R Hamilton Date Closed:	Found Issues none Resolution none
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Resolution Notes:

**Current HIPDB Reports**

Type	Submission Date	Status	DCN	Case ID
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No HIPDB Reports found for this credential.

**Action Items** [add] [add group]

Type	Assigned To	Activity Due	Effective	Completed	Order Signed	Created ▼	User
Intake	Case Intake, Hamilton, Cynthia R		04/20/2011	04/20/2011		04/20/2011	Hamilton, Cynthia R
Target: MOHAMMAD HASSAN SAID							
Warning: Warning Type: CASE PENDING							
Warning Effective Date: 04/20/2011							
Suppress License Print: NO							
Case Status: Status Changed To: Intake							
Action Info: Complaint Source: Other Jurisdiction							
Possible Imminent Danger? No							
Single Complaint Process Coordination Needed? No							



## AMA Physician Profile

\*\*

**Name and Mailing Address:**

MOHAMMAD HASSAN SAID MD  
PO BOX 40  
EPHRATA WA 98823-0040

**Primary Office Address:**

SAME AS MAILING ADDRESS

**Phone:** 1-509-754-4689

**Birthdate:** 10/22/1938

**Birthplace:** HAIFA PALESTINE

**Physician's Major Professional Activity:** INACTIVE

**Practice Specialties Self Designated by the Physician\*:**

**Primary Specialty:** FAMILY MEDICINE

**Secondary Specialty:** INTERNAL MEDICINE

\*Self-Designated Practice Specialties/Areas of Practice (SDPS) listed on the AMA Physician Profile do not imply "recognition" or "endorsement" of any field of medical practice by the Association, nor does it imply, certification by a Member Medical Specialty Board of the American Board of Medical Specialties, or that the physician has been trained or has special competence to practice the SDPS.

**AMA membership:** MEMBER

————— All Information from this Point Forward is Provided by the Primary Source —————

**Current and/or Historical Medical School:**

UNIV DE GRANADA, FAC DE MED, GRANADA, SPAIN

**Degree Awarded:** Yes

**Degree Year:** 1967





## AMA Physician Profile

### Current and/or Historical Post Graduate Medical Training Programs Accredited by the Accreditation Council for Graduate Medical Education (ACGME):

*Future training dates, as reported by the program, should be interpreted as "in progress" or "current" with projected date of completion. If the training program indicates that training for a physician in a particular specialty was not completed at their institution, the training segment will be identified as "INCOMPLETE TRAINING".*

**Institution:** OTTAWA GEN HOSP

**Specialty :** FLEXIBLE OR TRANSITIONAL

**State:**

07/1972 - 06/1973  
(VERIFIED)

**Note:** If you have discrepant information, please submit a Request for Investigation to the AMA so that we may verify the information with the primary source(s). See the last page of this Profile for instructions on how to report a data discrepancy.

### Current and/or Historical Medical Licensure:

<u>Jurisdiction</u>	<u>MD/ DO</u>	<u>Date Granted</u>	<u>Expiration Date</u>	<u>Status</u>	<u>License Type</u>	<u>Last Reported</u>
MONTANA	MD	06/08/1982	03/31/2007	INACTIVE	UNLIMITED	02/07/2007
WYOMING	MD	02/01/1982	06/30/2006	INACTIVE	UNLIMITED	04/10/2007
MAINE	MD	11/06/1980	10/01/1984	INACTIVE	UNLIMITED	04/04/2011
WASHINGTON	MD*	05/22/1980	10/22/2012	ACTIVE	UNLIMITED	04/06/2011
* Please contact the state board. More information may be available.						
SOUTH DAKOTA	MD	01/01/1980	NOT RPTD	INACTIVE	UNLIMITED	08/08/2003
NORTH CAROLINA	MD	01/01/1980	NOT RPTD	INACTIVE	UNLIMITED	06/16/2003
WISCONSIN	MD	10/28/1977	12/31/1983	INACTIVE	UNLIMITED	04/13/2011
NORTH DAKOTA	MD*	08/23/1974	06/30/2006	INACTIVE	UNLIMITED	04/06/2011

\* Please contact the state board. More information may be available.

**Note:** When the specific month and day are unknown, the date will display the default value of "01." Not all licensing boards maintain or provide full date values. Please contact the appropriate licensing board directly for this information.



## AMA Physician Profile

### Current and/or Historical NPI Information:

<u>NPI Number</u>	<u>Enumeration Date</u>	<u>Deactivation Date</u>	<u>Reactivation Date</u>	<u>Replacement Number</u>	<u>Last Reported Date</u>
1447372107	04/04/2007	NOT RPTD	NOT RPTD	NOT RPTD	04/12/2011

### ECFMG Certification:

**Applicant Number:** 00886531

**Note:** The Educational Commission for Foreign Medical Graduates (ECFMG) applicant identification number does not imply current ECFMG certification status. To verify ECFMG status, contact the ECFMG Certification Verification Service in writing at P.O. Box 13679, Philadelphia, PA 19101.

### Federal Drug Enforcement Administration:

\* Only the last three characters of active DEA number(s) are displayed.

<u>DEA Number *</u>	<u>Schedule</u>	<u>Expiration Date</u>	<u>Last Reported</u>
XXXXXX786	22N 33N 4 5	02/28/2014	04/08/2011

**Address:** 524 E Division, PO Box 40, Ephrata, WA 98823-0040

**Note:** Many states require their own controlled substances registration/license. Please check with your state licensing authority for requirement information as the AMA does not maintain this information.

### Specialty Board Certification(s)\*:

Specialty Board Certification(s) by one or more of the 24 boards recognized by the American Board of Medical Specialties (ABMS) and the American Medical Association (AMA) through the Liaison Committee on Specialty Boards, as reported by the ABMS:

The AMA Physician Profile has been designated by the ABMS as an Official ABMS Display Agent of Member Board Certification data. Therefore, the ABMS Board Certification information on the AMA Physician Profile is considered a designated equivalent source in regard to credentialing standards set forth by accrediting bodies such as the Joint Commission and National Committee for Quality Assurance (NCQA).

**Certifying Board:** AMERICAN BOARD OF FAMILY MEDICINE

**Certificate:** FAMILY MEDICINE

**Certificate Type:** GENERAL

<u>Duration</u>	<u>Effective</u>	<u>Expiration</u>	<u>Reverification Occurrence</u>	<u>Last Reported</u>
TIME LIMITED	07/09/1999	12/31/2006	RE-CERT(**)	04/07/2011
TIME LIMITED	07/10/1992	12/31/1999	RE-CERT(**)	04/07/2011
TIME LIMITED	07/12/1985	12/31/1992	RE-CERT(**)	04/07/2011
TIME LIMITED	08/27/1978	12/31/1985	INITIAL(**)	04/07/2011



### AMA Physician Profile

**Certifying Board:** AMERICAN BOARD OF FAMILY MEDICINE

**Certificate:** GERIATRIC MEDICINE

**Certificate Type:** SUB-SPECIALTY

<u>Duration</u>	<u>Effective</u>	<u>Expiration</u>	<u>Reverification</u>	<u>Occurrence</u>	<u>Last Reported</u>
TIME LIMITED	11/04/1998	12/31/2008		RE-CERT(**)	04/07/2011
TIME LIMITED	04/20/1988	12/31/1998		INITIAL(**)	04/07/2011

**Certifying Board:** AMERICAN BOARD OF INTERNAL MEDICINE

**Certificate:** INTERNAL MEDICINE

**Certificate Type:** GENERAL

<u>Duration</u>	<u>Effective</u>	<u>Expiration</u>	<u>Reverification</u>	<u>Occurrence</u>	<u>Last Reported</u>
LIFETIME	09/12/1979			INITIAL	04/07/2011
LIFETIME	01/01/1979			INITIAL	04/07/2011

**Note:** For certification dates, a default value of "01" appears in the day or month field if data were not provided to AMA. Please contact the appropriate specialty board directly for this information. (\*\*) Indicates an expired certificate.

\*This information is proprietary data maintained in a copyrighted database compilation owned by the American Board of Medical Specialties. Copyright 2011 American Board of Medical Specialties. All right reserved.

#### Medicare/Medicaid Sanction(s):

TO DATE, THERE HAVE BEEN NO SUCH SANCTIONS REPORTED TO THE AMA BY THE DEPARTMENT OF HEALTH AND HUMAN SERVICES.

#### Other Federal Sanction(s):

TO DATE, THERE HAVE BEEN NO FEDERAL SANCTIONS REPORTED TO THE AMA BY ANY BRANCH OF THE US MILITARY, THE VETERAN'S ADMINISTRATION OR THE US PUBLIC HEALTH SERVICE.



## AMA Physician Profile

### Additional Information:

TO DATE, THERE IS NO ADDITIONAL INFORMATION FOR THIS PHYSICIAN ON FILE.

The content of the AMA Physician Profile is intended to assist with credentialing. Appropriate use of the AMA Physician Masterfile data contained on this Profile by an organization would meet the primary source verification requirements of the Joint Commission and the American Accreditation HealthCare Commission/URAC. The Physician Masterfile meets the National Committee for Quality Assurance (NCQA) standards for verification of medical education, post graduate medical training, board certification, DEA status, and Medicare/Medicaid sanctions.

If you note any discrepancies, please log onto our web site (<http://www.ama-assn.org/go/amaprofiles>) and go to the order detail page, select the D following the physician's name and enter the data in question. Or you can mark the issues on a copy of the profile and mail or fax to:

Division of Database Products and Licensing  
Attn: Credentialing Products  
515 N. State Street  
Chicago, IL 60654  
800-665-2882  
312 464-5900 (fax)

If you have questions or need additional information, please call the AMA Profile Service customer support line at 800-665-2882.

Credential View Screen

**MOHAMMAD HASSAN SAID**

Address:

☒ Public ☐ Mail ☐ Renewal Mail

[change public address]

MOHAMMAD HASSAN SAID  
PO BOX 40  
EPHRATA, WA 98823

ID 360875  
Warnings CASE PENDING  
ENFORCEMENT ACTION  
SSN/FEIN 1 - DOH Licen...  
Contact Standing Living  
Contact Type INDIVIDUAL  
Birth Date 10/22/1938  
Public File YES  
Mailing List  
Legacy Licensure Name SAID, MOHAMMAD  
HASSAN

Contact  
Audit  
Public Cases  
Cont. Edu  
Documents  
Owned By/Key Mgmt  
Exams  
Experience  
Notes  
Schools  
Supervises  
SupervisedBy  
Legacy  
Librarian  
Application  
Other State License

201-155470  
Assess

Comments: RELEASE 7/97\ SOC 3/07\ GRANADA-SPAIN-1967 AMENDED SOC 01/08

Physician And Surgeon License [form letter]

Credential # MD.MD.00018311  
Legacy License # MD00018311  
Application Date  
Effective Date 10/06/2010  
Expiration Date 10/22/2012  
First Issuance Date 05/22/1980  
Last Date Of Contact  
CE Due Date 10/22/2012

Credential Status ACTIVE (10/08/2010)  
Status Reason ACTIVE  
Amount Due \$0.00  
Date Last Activity 10/15/2010 8:24:40 AM  
Last Updated by Creighton, Vicki I  
Certificate Sent Date 10/08/2010  
Work Queue LEGACYDATA, DOH

Audit  
Documents  
Workflow  
Key Mgmt  
Fees  
Notes  
Print Docs  
Comp. Audit  
Renewal  
Legacy

Comments: RELEASE 7/97\ SOC 3/07\ GRANADA-SPAIN-1967 AMENDED SOC 01/08

Supervises User Defined License Data Legacy HIPDB

[update]

2011-155813

## **NOTICE**

WAC 246-15-030, procedures for filing, investigation, and resolution of whistleblower complaints.

(1)(b) Instructs that staff will affix a permanent cover to the letter of complaint or other form of notice in the complaint file, noting the statutory citation concerning protecting the identity of the complainant.

(3)(c) Ensure upon case closure, that the permanent cover affixed in subsection (1)(c) of this section will remain.

RCW 43.70 provides that the identity of a whistleblower who complains in good faith to the Department of health about the improper quality of care by a health care provider as defined in RCW 43.72.010 **shall remain confidential**.

Pursuant to the above RCW and WAC it is staff's duty to see that the complainant's name or any information which may identify the complainant is not disclosed.

## **NOTICE**



STATE OF WASHINGTON  
DEPARTMENT OF HEALTH  
MEDICAL QUALITY ASSURANCE COMMISSION  
*PO Box 47866, Olympia, WA 98504-7866*

April 29, 2011

Mohammad H. Said, MD  
PO Box 40  
Ephrata, WA 98223

COPY

RE: Mohammad H. Said, MD  
2011-155813MD; Credential No. MD00018311

Dear Dr. Said:

The Medical Quality Assurance Commission received a report alleging unprofessional conduct in another state. . Therefore, this case has been closed.

You have the right to request any information contained in the file. If you would like a summary of the case or other materials in the file, please submit a written request for a copy to the Department of Health, Public Disclosure & Records Center, PO Box 47865, Olympia, WA 98504-7865 or fax to (360)586-2171.

Because the report file was closed without an investigation, the existence of this report is not releasable through the automated voice response system or in response to telephone inquiries. However, the report is subject to written public disclosure requests (RCW 18.130.0-95 and RCW 42.17). Even though this case has been closed, you have the right to voluntarily submit a written statement which will become part of the information provided in response to any public disclosure request.

If you have any questions, please call me at (360)236-2770, or contact me by email at [jim.smith@doh.wa.gov](mailto:jim.smith@doh.wa.gov).

Sincerely,

JAMES H. SMITH, Chief Investigator  
Department of Health  
Medical Quality Assurance Commission  
PO Box 47866  
Olympia, WA 98504-7866



## Washington Medical Quality Assurance Commission

## Board Action Disciplinary Alert Report

Report Date: 04/18/2011

Begin Date: 04/18/2011 End Date: 04/18/2011

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Name	DOB	Degree Code	School	Yr/Grad.
Said, Mohammad Hassan Mahmud	10/22/1938	MD	Universidad De Granada	1967

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License#: MD00018311

Reporting State Board: MONTANA Order Date: 03/31/2011

Action: CONDITIONS FOR REINSTATEMENT/RESTORATION ESTABLISHED  
Additional Details: Conditions established for reinstatement of license upon reapplication for licensure. Based on action taken by the Washington Medical Board.

Basis for Action(s): Due to Action Taken by Another Board/Agency

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Redaction Summary ( 1 redaction )

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1 Privilege / Exemption reason used:

1 -- "DOH Licensee Social Security Number - RCW 42.56.350(1)" ( 1 instance )

Redacted pages:

Page 21, DOH Licensee Social Security Number - RCW 42.56.350(1), 1 instance